

RE: _____

For office use only



State of New Jersey
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS
P.O. Box 45015, NEWARK, NEW JERSEY 07101
(973) 504-6460

Engineer-in-Training Reference Form

(Please type or print.)

NAME OF REFERENCE

NAME OF APPLICANT

Last name First Middle

Last name First Middle

Street address

Street address

City State ZIP code

City State ZIP code

The applicant for registration as an engineer-in-training whose name and address are given above has sent you this reference statement regarding his/her professional qualifications. He/she indicated that you have personal knowledge of his/her character and professional experience.

Please answer the following questions and return this form to the State Board of Professional Engineers and Land Surveyors, P.O. Box 45015, Newark, N.J. 07101, by _____ in order for the applicant to be considered for the next scheduled examination. All information provided is confidential.

STATEMENT OF REFERENCE *(From your own personal knowledge.)*

1. Your business or profession: _____
2. Length of acquaintance: _____
3. Relationship, if any: _____
4. Applicant's moral habits or character: _____
5. Applicant's general reputation in the community: _____
6. If you have been associated with the applicant in professional practice, please supply the following information.
Position held by the applicant: _____
Character of the work performed by the applicant: _____
7. In view of your knowledge of the applicant, do you recommend him/her for a certificate of registration as an engineer-in-training? ☐ Yes ☐ No

Date

Name (print or type)

Signature

If you are a professional engineer, please give your license number: _____, _____
State of licensure